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Bib Data Sheet

CONFIRMATION NO. 8162

SERIAL NUMBER 10/695,492	FILING OR 371(c) DATE 10/28/2003 RULE	CLASS 347	GROUP ART UNIT 2861	ATTORNEY DOCKET NO. 100110842-1
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APPLICANTS

David A. Johnson, Boise, ID;

** CONTINUING DATA ***** *del*** FOREIGN APPLICATIONS ***** *del*IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
08/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ID	SHEETS DRAWING 9	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Hai Cliphorn</i> Examiner's Signature	<i>HJ</i> Initials			

ADDRESS

22879

TITLE

Printing system calibration

FILING FEE RECEIVED 1732	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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